


Indian Health Service  
Injury Prevention Symposium Class of 2006  
Brochure Summary  
June 8, 2006

NAME	PROJECT TITLE
 <p><b>Michelle S. Begay</b> Lieutenant Tohono O’odham Nation Police Dept. P.O. Box 189 Sells, AZ 85634</p>	<p><b>Title</b> <i>Improving domestic violence law enforcement response on the Tohono O’odham Nation.</i></p> <p><b>Purpose</b> Develop and implement law enforcement policies and procedures to reduce repeated abuse and serious injuries from intimate partner violence (IPV).</p> <p><b>Background</b> National statistics indicate that American Indians and Alaskan Natives experience high rates of intimate partner violence. With a resident population of 28,640 Arizona’s Tohono O’odham (TO) Nation is geographically the second largest Indian reservation in the United States.</p> <p><b>Methods</b> I collected data on IPV from TO law enforcement records and local victim services. I conducted focus groups to determine victims’ and providers’ perceptions of law enforcement response to IPV at TO. I developed a law enforcement protocol after examining several domestic violence codes and manuals from other tribes and provided protocol-based trainings to TO law enforcement personnel.</p> <p><b>Results</b> After implementing the program, TO law enforcement increased arrest clearance rates, improved data collection and reporting of domestic violence, and increased victim safety and cooperation through victim service referrals and collaboration. However, arrest rates decreased the last three years. This may be due to non-involvement attitudes by law enforcement, over-populated correctional facilities, and overwhelmed tribal service programs.</p> <p><b>Conclusion</b> The protocol improved domestic violence response from</p>

	<p>case initiation to investigation to adjudication. It also created a foundation for a coordinated response among criminal justice and tribal service providers. The next steps for this project are to develop a coordinated response, improving records management systems, and revision of domestic violence tribal codes to include stalking.</p>
 <p><b>Elvira J. Martin</b>          CHR Supervisor          Navajo Nation CHR Outreach Program          P.O. Box 2197          Chinle, AZ 86503</p>	<p><b>Title:</b> <i>Enlisting CHRs to Increase Car Seat Usage in Central Navajo Nation</i></p> <p><b>Purpose:</b> The purpose of my project was to enlist Community Health Representatives (CHRs) to increase car seat usage within the Chinle Service Unit.</p> <p><b>Background:</b> Located in Central Navajo Nation, the Chinle Service Unit had a baseline car seat usage rate of 15% (Calendar year 2005). The Navajo Nation has a primary car seat law; however, there is lack of enforcement. Also, car seats are often used incorrectly.</p> <p><b>Methods:</b> The Community Health Representatives assisted in completing surveys while making home visits. They completed 133 surveys from parents of children birth to 5 years of age. I also conducted a focus group of 8 parents of young Children at Pinon Chapter House. 13 of the Chinle CHRs obtained training on the SNAPP Curriculum to enhance their knowledge in providing car seat education.</p> <p><b>Results:</b> Findings from the surveys and focus group are that: 1) Parents did not have car seats for their children because they could not afford to purchase them; 2) Only 3 parents had been cited for non-use of car seats; 3) 86 parents (65%) requested more education on car seat usage; 4) The majority of parents did know what car seat recalls were for.</p> <p><b>Conclusion:</b> CHRs can play an important role in promoting child passenger safety by collecting data; educating parents on the correct purchase, installation, and use of car safety seats; and advocating for increased enforcement of occupant restraint laws. The SNAP curriculum is excellent for preparing CHRs to increase their involvement in child passenger safety.</p>



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**Title:** *Building tribal capacity for workplace safety*

**Purpose:** Reduce workplace injuries by developing a Tribal Safety Program.

**Background:**

1. A Tribal leader from the San Lucy District (SLD) of the Tohono O'Odham (TO) Nation requested IHS assistance to reduce workplace injuries.
2. The SLD is one of 11 seats of authority at the TO Nation, geographically the 2nd largest Indian reservation in the U.S. with 25,940 members.

**Methods:**


As the IHS EH Specialist, I assisted SLD personnel in establishing their own safety program, rather than conducting safety inspections myself. I used these approaches:


1. Prompted formation of a Tribal Safety Task Force.
2. Located PowerPoint Presentations from OSHA for training.
3. Inventoried chemicals and catalogued MSDS's for PPE needs.
4. Conducted telephone conferences to augment face-to-face meetings
5. Included supervisors in the design and implementation of safety surveys.
6. Helped redraft policies and procedures to create an expanded workplace safety manual.

**Results:**

1. The SLD Workplace Safety Task Force meets monthly.
2. Membership in the Task Force includes the District Chairman, Vice Chairman and all Departmental Supervisors.
3. Supervisors report a much better understanding of safety protocols and OSHA requirements.
4. The policy and procedures manual now includes OSHA requirements.
5. The Phoenix IHS Institutional Environmental Control Officer has agreed to assist in a future program review.

**Conclusions:** There are many sources (especially from OSHA) for safety training sessions. Customizing programs to local needs can be accomplished through a Task Force.

	<p>Improved reporting of workplace injuries is a key need.</p>
 <p><b>Holly Tenique Kostrzewski</b>  Injury Prevention Program  Coordinator  Fond du Lac Band  Lake Superior Chippewa PHN  Dept.  927 Trettel Lane  Cloquet, MN 55881</p>	<p><b>Title:</b> <i>Brain Injury Prevention Project, Fond du Lac Reservation.</i></p> <p><b>Background:</b>  Traumatic brain injuries (TBI) are a major cause of disability among Native Americans. The leading causes of hospitalizations for TBI are motor vehicle crashes (24%), assaults (17%), and falls (16%). Rates of TBI among males are two and one-half times greater than females.</p> <p><b>Objective:</b>  Produce a brain injury prevention educational campaign for the Fond du Lac Community based on input from health care providers and community residents.</p> <p><b>Methods:</b>  Thirteen key informant interviews and five focus groups were developed to determine knowledge of TBI, preferred avenues and content of educational outreach, and appropriateness of written materials. Fond du Lac collaborated with the Minnesota Department of Health and the Great Lakes Intertribal Consortium.</p> <p><b>Results:</b>  Although most interviewees and focus group participants were aware that brain injury was a serious problem, there were differences in perceptions related to cause, risks, and prevention behavior. Results indicated a need for brain injury prevention education. The preferred methods of delivery were printed materials and oral presentations.</p> <p>Based on these findings, a PowerPoint presentation and eight brochures were developed for the brain injury prevention campaign. The brochures address Shaken Baby Syndrome, Fetal Alcohol Syndrome, Elder Falls, Motor Vehicle Crash, Car Seat Use, Helmets, What is a Traumatic Brain Injury?, and Domestic Violence.</p> <p><b>Conclusion:</b>  Qualitative methods can guide the design and implementation of an educational injury prevention program. My next step is to conduct TBI presentations in multiple settings at Fond du Lac, distribute the printed</p>

	materials, and evaluate improvements in knowledge and attitudes toward TBI prevention.
 <p><b>George S. Hupp</b> Public Health Nurse Public Health Nursing Dept. Sells Indian Hospital Sells, AZ 85634</p>	<p><b>Title:</b> <i>Reducing Firearm Related Injuries on the Tohono O’Odham Indian Reservation through the Distribution of Gun Safes</i></p> <p><b>Purpose:</b> Reduce firearm-related thefts and injuries by restricting unauthorized access to firearms in the home.</p> <p><b>Background:</b> The Tohono O’Odham (TO) reservation is in Arizona and includes 75 miles of the U.S.-Mexico border. Illegal immigration and drug smuggling are problems. Many tribal members have had firearms stolen from their homes.</p> <p><b>Methods:</b> I reviewed TO Nation police reports for incidents of illegal firearm use. As a Public Health Nurse, I conducted home surveys on the presence and storage of long guns (rifles, shotguns). I obtained 50 trigger locks from the TO Police Department. With funds from the IHS Tucson Area, I obtained 20 safes and have distributed 10. After 30 days, I resurveyed 6 homes. At tribal district offices I distributed brochures on firearm storage from the National Shooting Sports Foundation.</p> <p><b>Results:</b> Police reports revealed instances of illegal firearm use. Some were gang-related, some involved teenagers stealing their parents’ firearms. All 6 visited households had at least one rifle or shotgun. The firearms were most commonly in bedrooms leaning against a wall. All the owners requested storage cabinets: 2 wanted trigger locks. On follow-up, all 6 owners were using the safes and were happy with them.</p> <p><b>Discussion:</b> Most tribal members do not safely lock and store firearms in their home. Trigger locks are not popular: owners want their firearms to be immediately available: and the locks do not prevent firearms from being stolen. Firearm owners on the reservation accepted and used gun safes for their long guns. My next step is to locate additional funding for more safes.</p>



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***Title: Child Occupant Restraint Use Campaign and Reasons for Non-use in a Southwestern Native American Community***

**Child Occupant Restraint Use Campaign and Reasons for Non-use in a Southwestern Native American Community**

Nationally, motor vehicle injuries are the second leading cause of death for Native American children ages one to nine years and child safety seats reduce the risk of death by 71 percent for infants and 54 percent for toddlers. Observational restraint surveys (N=153 children) on a Native American Reservation in the Southwestern United States in 2005 revealed that 8.5% of the children were restrained in child safety seats. One goal of the project was to identify barriers of child occupant restraint use in the community using focus groups and key informant interviews. The second goal was to increase child safety seat use by 20% (59-79%) among children enrolled at a local Child Care Center. A two month effort of parent/child education on occupant protection and availability of child safety seats was implemented at the Center.

**Results:** The two primary barriers of child safety seat use in the community were lack of enforcement of the child safety seat law, and the public's lack of understanding of the importance of child safety seats. Efforts to overcome barriers of child safety seat use should focus on making the existing child occupant restraint law more stringent, increasing enforcement of the law, and developing enhanced public awareness campaigns on the importance of child occupant restraints. At the child care center, there was a 21% decrease (59-38%) of child occupant restraint use. A better outcome would likely be seen if there was increased participation from the Center therefore it is recommended that the project time line be extended at the Center.



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**TITLE: *DUI Intervention on Turtle Mountain Chippewa Reservation.***

**Introduction:** Effective interventions are needed to stop drunk and drugged driving on Turtle Mountain Chippewa Reservation (TMCR). Alcohol-related crashes on Turtle Mountain are 75% of all crashes. Nationally, alcohol-related crashes are 41%. In order to address this problem, we need to enact effective interventions on the reservation. On the TMCR, the DUI Code is not being enforced. A major reason is lack support for enforcement by members of the Tribal Council.

**Methods:** A committee made up of different tribal entities - Court, Police Dept., MADD, Indian Health Service, Alcohol and Substance Abuse Agencies - added amendments to the existing TM Tribal DUI Code to increase the effectiveness of the code. Attempts to have the amended code enacted have so far not been successful. By working with several agencies in the community, we have compiled data showing just how prevalent the problem is on our agency. Presentations at the schools, and community functions highlight the problem and offer interventions.

**Results and discussion:** Although the Model DUI Code has not yet been adopted, because of the publicity and collaboration with the PD, Courts, and other agencies DUI laws are being enforced a little better. Tribal members do seem more aware that they will be prosecuted if they are found to be drinking and driving. Other programs have committed to help with the passage of this Model Code. We need to continue to advocate for the Model Code and to encourage the enforcement of the present code.





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***Title: Restricting access to guns and medicines among young people at risk of suicide in rural Alaska***

**Purpose:** The purpose of the project is to evaluate the feasibility of a program that distributes gun lockers and medicine cabinets to families with youth at risk for suicide in a small Alaska Native community.

**Background:** Suicide is the leading cause of injury death in Western Alaska. Firearms are used in 60% of completed suicides and medicines are the most common method used in hospitalized suicide attempts in Western Alaska. However, locking cabinets for firearms and medicines are not available in rural Alaska. Previous studies in Alaska have shown that installation of gun lockers can increase the safe storage of guns. No similar studies have been conducted with regard to medicine cabinets. Increased safe storage of lethal means is a promising intervention to reduce youth suicide.

**Methods:** Families of at risk youth are enrolled in the program by local health and safety professionals. Youth suicidal risk factors and families' reason for wanting a gun locker or medicine cabinet are being collected.

**Results:** To date, 6 gun lockers have been installed in homes. 24 gun lockers and 30 Medicine Cabinets will be installed in homes within one month.

**Discussion:** Community interest in safe storage devices is high. Most households were eligible for this program.

**Conclusions:** Targeted gun locker and distribution programs should use multiple recruitment strategies to avoid stigma within the community. Future studies should evaluate this program's impact on safe storage practices.